

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 10/019370 FILING DATE

APPLICANT(S)

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.
1	1			
2		1		
3	2		1	
4	1			
5	1			
6	1			
7		1		
8	4		1	
9	1		1	
10	1		1	
11	1		1	
12	1		1	
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16	1		1	
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TOTAL ID.		1		
TOTAL EP.		20		
TOTAL CLAIMS	20	1	16	

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IND.	DEP.	IND.	DEP.	IND.	DEP.
51					
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99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					

10-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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